2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001979

FILED Apr 11, 2011 Secretary of State

Entity Name: HERITAGE OAK PARK COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

475 W TOWN PLACE #200 ST. AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

475 W TOWN PLACE #200 ST. AUGUSTINE, FL 32092

FEI Number: 65-0915835 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SEVERN TRENT SERVICES, INC. 475 W TOWN PLACE #200 ST. AUGUSTINE, FL 32092 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD

Name: RASK, SHARON J

Address: 475 W TOWN PLACE, SUITE 200 City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: PD

Name: BITGOOD, BRIAN

Address: 475 W TOWN PLACE, SUITE 200 City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: SD

Name: ALLCROFT, VERA

Address: 475 W TOWN PLACE, SUITE 200 City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: TD

Name: BONNEAU, ED

Address: 475 W TOWN PLACE, SUITE 200 City-St-Zip: SAINT AUGUSTINE, FL 32092

Title:

Name: KELLER, BRUCE

Address: 475 W TOWN PLACE, SUITE 200 City-St-Zip: SAINT AUGUSTINE, FL 32092

Title:

Name: KOSINSKI, TROY

Address: 478 W TOWN PLACE, SUITE 200 City-St-Zip: SAINT AUGUSTINE, FL 32092

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD BONNEAU TRES 04/11/2011